

# **Operational Policy Letter #60**

**Department Of Health & Human Services**

**Center for Health Plans and Providers**

**Health Care Financing Administration**

**Medicare Managed Care**

**November 14, 1997**

**Updating of the**

**"MEDICARE MANAGED CARE NATIONAL MARKETING GUIDE"**

**Issue/Question:**

Will the "Medicare Managed Care National Marketing Guide" be updated on a regular basis?

**Answer:**

Yes, a panel consisting of CHPP staff and Regional Office staff has been established to periodically update the guide regarding interpretative statements of existing guide content and expression of new marketing review procedures. The panel is called the "Medicare Managed Care National Marketing Guide Product Consistency Team". As the Medicare managed care market evolves, HCFA's Plan and Provider Purchasing Policy Group will periodically update the guide with new marketing review policy.

The content of this OPL represents update # 1 of the guide since its release on September 8, 1997. The update consists of:

1. A new chapter for the guide; chapter XI, entitled "Review of Marketing Materials for National Plans" (pages 2 through 6).
2. A section on clarifications, corrections, and new policy scenarios occurring from the September 8, 1997 release date to the present (November 14, 1997) (pages 7 through 10).

**Contact:**

HCFA Regional Office Managed Care Staff

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## **Chapter XI**

### **Guidelines for Review of Marketing Materials for National Plans**

#### **I. Introduction**

These guidelines, effective November 17, 1997, are to be used by HCFA national plan teams and national plans that prepare marketing materials for use in more than one region. The guidelines apply to both marketing materials submitted with new applications as well as post contract marketing efforts.

The purposes of these guidelines are:

- to streamline the marketing process for national plans;
  - to avoid unnecessary repetition of document submission and review;
  - to decrease the amount of time currently being spent on marketing material review.
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#### **II. Definitions**

**- Lead RO**

HCFA Regional Office (RO) with final authority to approve plan's national marketing material

**- Local RO**

HCFA RO with a contracted plan in its region

**- National plan team**

staff from each HCFA RO in which a plan has a Medicare contract

**- Nocal plan**

contracted plan within a HCFA region

**- National plan material**

material identified by a national plan for use in more than one HCFA region

**- Local Material**

material specific to a local plan

**- PCT**

Product Consistency Team -- comprised of RO and CHPP staff with responsibility to assure consistency in the application of the national marketing guidelines

**- PPPPG**

Plan & Provider Purchasing Policy Group within the Center for Health Plans & Providers (CHPP) responsible for making policy determinations

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#### **III. Determining the Lead Region**

Generally, the RO where the plan's corporate office is located will serve as the lead RO.

In some situations, a lead RO may not be the one in which the plan's corporate office is located. For example:

- the plan's corporate headquarters is in a region with no Medicare contracts;
- the national plan team designates another lead RO;
- the corporate office location changes;

Authority for determination of lead RO assignments resides with RO officials representing the geographic locations of the national plan headquarters and contract sites. When necessary, appropriate RO consortia administrators will assist in lead RO determinations.

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## **IV. Responsibilities**

### **A. Health Plan**

- assures materials submitted are consistent with the requirements in the [\*Medicare Managed Care National Marketing Guide\*](#) and the *HMO/CMP Manual*.
- submits for approval proposed copies of its national marketing materials to the lead and local ROs with a dated cover letter which identifies the material as national and also identifies the recipients (note: all submitted materials, both national and local, must be identified with a sequential identification code. The identifying system will be determined by the RO "national plan team").
- submits for approval proposed copies of local marketing materials to the local RO with a dated cover letter. This material will be reviewed and approved by the local RO for local use only.
- identifies previously approved local material that the plan now wants to use nationally and submits it to the lead and local ROs for approval. Such materials must be accompanied by the local ROs original approval letter/documentation.
- distributes final copies of its national marketing materials, within a time frame to be determined by its national plan team (10 days after HCFA approval is recommended), to the lead and local ROs with a dated cover letter which identifies the recipients.

### **B. Lead RO**

- assigns and notifies local ROs of response times for national materials. (Note: response times may vary depending on complexity and volume of material being reviewed and local RO workloads).

- considers comments from local ROs on both initial and revised plan marketing submissions and makes final review decision on national marketing material within 45 days of receipt.
- notifies the local ROs of the approval date for national materials.
- refers policy issues which require additional development or clarification to the appropriate Central Office component and copies all ROs.
- arranges periodic conference calls with the local ROs.
- requests assistance from the PCT, PPPPG or the RO HPP Managers as necessary.
- determines Use and File status for national plan material.
- (OPTION: each lead RO and the associated national plan team ROs may request that the health plan include at the bottom of each page of marketing material an identification/approval code (e.g., HCFA\*\*MM/YY, in which the \*\* represents the number of the lead RO and the MM/YY is the month and year the piece was approved. This would allow the plan to submit only those pages that have changes in the annual review of such items as the EOC, Member handbook, etc.)

#### C. Local RO

- approves marketing materials which are applicable to the local plan(s) only. (Approval letters will state that material is approved for local use only.)
- submits written comments on the national marketing materials to the lead RO within a time frame determined by the national plan team. In the event the local RO finds the national submission "acceptable, as is," it should notify the lead RO of this finding. If the lead RO does not receive a response it will be assumed that there are no comments.
- Determines Use and File status for local material.

#### D. PCT

- Meets periodically to resolve issues involving inconsistencies in the interpretation, application and approval of marketing materials.
- Requests written marketing policy clarifications and determinations from PPPPG.
- Drafts written updates for the [\*Medicare Managed Care National Marketing Guide\*](#) and distributes them nationally to all plans and ROs.

#### E. PPPPG

- Resolves policy questions and distributes policy determinations to all regions.
- Assures that the [\*Medicare National Marketing Guide\*](#) and the *HMO/CMP Manual* are updated to reflect changes in law, regulations and policy.